

ALAMEDA COUNTY SUPERIOR COURT
APPLICATION FOR APPOINTMENT TO ADR PANELS
including Judicial Arbitration, Mediation, Neutral Evaluation, and Private Arbitration

1. APPLICANT:

Applicant's Name: Charles E. Farnsworth
Firm Name: Law Office of Charles E. Farnsworth
Address: 7677 Oakport Street, Suite 565

City/State/Zip: Oakland, Ca. 94621
Telephone: (510) 635-2790 Fax: (510) 635-1516
Email: cefarns@pacbell.net

2. PANEL REQUEST: *(All applicants are requested to serve as Judicial Arbitrators)*

Check each panel for which you are applying:

x Judicial Arbitration x Mediation x Neutral Evaluation x Private Arbitration

3. EDUCATION:

Dates (from-to)	College/University/Law School	Degree Obtained
<u>1960</u>	<u>University of Kansas</u>	<u>B.S.</u>
<u>1966</u>	<u>Stanford University</u>	<u>L.L.B.</u>
<u>1993</u>	<u>Mills College</u>	<u>M.A.</u>

4. LEGAL EXPERIENCE: State Bar No. 42610 Date Admitted: 1/69

A. Are you a member in good standing of the State Bar of California? x Yes No

B. Are you a retired judicial officer? Yes x No

Please describe when/where you last served as a judicial officer:

C. Are you actively engaged in the practice of law at this time? x Yes No

If not, are you retired from practice? Date retired:

If your license is presently inactive, please explain:

D. Are you currently active in litigation practice? Yes x No

Approximately what percentage of your practice involves litigation? %

E. If your practice includes personal injury litigation, approximately what percentage of your practice involves the representation of: plaintiffs % ; of defendants % ?

F. How many of the following have you personally handled as attorney of record in the past five years? Jury Trials 0 ; Court Trials 0 ; Mediations 0 ; Arbitrations 0 ;

G. Describe any legal publications or teaching you have done: Instructor of Law, Bryan Busines College (1996-99)

5. ADR TRAINING and EXPERIENCE

Course Title	Sponsoring Organization	Hours of Credit	Dates
Advanced Employ. Arb.	American Arb.Assn.	8	2002
Commercial Arb.	American Arb.Assn.	8	2000
Adv.Mediation Strategy	Negotiation Strategy Inst.	16	1997
7 other courses	AAA, NASD, USDC(N.D.Ca.)	75	1993-2000

A. Number of years experience as: mediator 10; arbitrator 14; neutral evaluator 9;

B. List all other court-connected ADR panels of which you are a member, specifying the processes for which you have qualified: AAA (Employment, Commercial), NASD (arb. and mediation), CoCoCounty (arb., med. ene), USDC (arb., med., ene).

C. State the name(s) of any organization(s) through which you have provided ADR services during the past five years, giving the dates and the services you provided: American Arbitration Association (arbitrations); National Assn. of Securities Dealers (arbitrations).

D. Describe the subject matter of five disputes in which you served as the ADR provider in the past 5 years, including the dates of service, the process and if you were sole or co-provider.

- Breach of Empl.Contract/2001/3-day arbitration/sole provider;
- Wrongful Death/1998/4-day mediation/sole provider;
- Breach of Empl. Contract/2001/5-day arbitration/Chair of panel;
- Elder abuse/2002/Mediation/sole provider;
- Civil Rights-WorkComp/2003/Mediation/sole provider;

E. Is your ADR style best described as more facilitative or less evaluative/directive?

F. Describe any ADR related publications or training you have done: U.S.Department of Justice (Mediation Trainer 1997)
Amer. Arb. Assn. (Mediation Seminar 1999)

G. Set forth your hourly fee or fee schedule, including any sliding scale or pro bono provisions. Attach a copy of your fee agreement. (Please note: Judicial arbitrators waive compensation for the first three (3) hours of hearing time in Alameda County and all ADR panelists are requested to accept at least three (3) Judicial arbitration cases per year).

My hourly fee is \$300, split among the parties. Not more than one hour is charged for preparation. A one-hour charge is made for any postponement requested by the parties.

6. AVAILABILITY/SPECIAL REQUIREMENTS

A. List any languages, other than English, in which you are able to conduct ADR proceedings: Spanish

B. Please state any special bi-cultural/multi-cultural capabilities or familiarity you possess:

C. You are available to conduct ADR conferences: x in your office; x at counsel's office; other (please describe: _____)

D. You are available to conduct ADR proceedings: x during regular office hours; _____ evenings by appointment; _____ weekends by prior arrangement;

E. Please describe any requirements you have for ADR participants such as submission of copies of pleadings, briefs, declarations in lieu of testimony, etc.: Briefs required; may be faxed.

7. SUBJECT MATTER DESIGNATION

Please check each area below in which you are qualified by training/experience to provide ADR services, indicating the percentage it represents of your law practice, if any, and the ADR process(es) which you are prepared to offer in that area:

Case Type Accepted	% of Practice	Judicial Arb.	Mediation	Neutral Eval.	Private Arb.
Bankruptcy					
Business/Corp.		x	x	x	x
Civil Rights		x	x	x	x
Collections					
Construction					
Contracts		x	x	x	x
Elder law/abuse		x	x	x	x
Employment		x	x	x	x
-Discrimination		x	x	x	x
-Harassment		x	x	x	x
-Termination		x	x	x	x
Environmental					
Fraud		x	x	x	x
False Imprison.		x	x	x	x
Family Law					
HO Ass'n					
Insurance Cov.					
Intellect. Property					
Landlord-Tenant		x	x	x	x
Legal Malpractice		x	x	x	x
Maritime					
Med Malpractice					
Partnership		x	x	x	x
P.I. – Auto		x	x	x	x
P.I. – Other		x	x	x	x
Premises Liability		x	x	x	x
Probate/Trust					
Product Liab.		x	x	x	x
Real Property					
Securities		x	x	x	x
Tax					
Toxic Torts					
Wrongful Death		x	x	x	x
Other:					

MEDIATION FEE AGREEMENT

Case Name: _____ Case #: _____

We, the undersigned PARTIES, have voluntarily agreed to submit our dispute as referenced above to Mediation and have agreed that _____ shall serve as Mediator.

1. RIGHTS AND OBLIGATIONS OF THE PARTIES

The PARTIES understand and agree that mediation is voluntary and that any party may end participation in the process at any time. The PARTIES understand that the Mediator is a licensed attorney. However, the Mediator will not provide the PARTIES with legal advice nor represent the interests of any party as an attorney. The services of the Mediator are strictly limited to the mediation process. The PARTIES understand that each has the right to have an attorney present during the mediation and may consult an attorney regarding their legal rights and obligations at any time.

2. DESCRIPTION OF THE MEDIATION PROCESS

Mediation is a voluntary, informal, confidential process in which the Mediator assists the parties in communicating with each other, helps the parties clarify facts, identifies legal issues, and explores various options designed to lead to the resolution of the dispute.

The parties agree that the purpose of Mediation is to enter into a mutually acceptable agreement to resolve all relevant issues. Any agreement reached as a result of the Mediation shall be in writing, and shall be binding on the parties if the parties agree in writing that it shall be binding. A binding agreement may be entered in the appropriate court as an enforceable Judgment.

The parties understand and agree that the mediation proceedings shall be confidential and cannot be used in any legal proceeding unless the Parties have entered into a written agreement that specifies it is binding. The Parties and Mediator acknowledge that the provisions of California Evidence Code 1115 through 1128 apply to this mediation.

3. FEES FOR SERVICE

It is understood and acknowledged that the fees for the Mediator's services are subject to negotiation and agreement by the Mediator and the parties (with the exception of Parties found eligible for indigent or modest means service). The Mediator's hourly rate is \$_____, payable by the parties as follows: _____% by _____ (party) and _____% by _____ (party). Fees are immediately due and payable upon receipt of an itemized invoice. An initial refundable retainer in the amount of \$_____ per party is due seven days in advance of the Mediation. If the mediation hearing is cancelled less than 72 hours prior to the date set, _____% of the retainer shall be forfeited by each party. All checks shall be made payable to: _____.

4. ACKNOWLEDGEMENT

We hereby declare that we have read, understood and agreed to the foregoing terms for Mediation and have been provided with a copy of this agreement.

Party Signature, Dated: _____

Party Signature, Dated: _____

Attorney Signature, Dated: _____

Attorney Signature, Dated: _____